U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



1 File Number U - 3/69

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

2. Fiscal Year Covered From:

City ZIP Code + 4 00000 - 0000	ing documents), has been examined by the signatory and is, to the best of the
City State ZIP Code + 4 00000 - 00000 Signa 15. Signature and verification. The undersigned declares, under penalty of submitted in this report (including the information contained in any accompany)	ature Perjury and other applicable penalties of the law, that all of the information ing documents), has been examined by the signatory and is, to the best of the
City XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	ature
City ***XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	of the summanument of the Property of \$1.05 dec. the summanument of the base of the \$1.05 dec. \$1.0
Promptistics (A) Model And a second project (S) (A) and detailment on the PLOT (B) (A) and detailment on the PLOT (B) (A) and a second project (S) (B) and a second project (B) (B) and a second pr	File and commentationally in the Property of the Contract of t
WWWTGGGGGGGGGGGGGGGGGGGGGGGGGGGGGGGGGG	
Street XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	
P.O. Box, Bldg., Room No., if any	7.b. Amount.
Trade Name, if any: ************************************	
Name ************************************	N/A
Name and address of Employer (including trade name, if any).	7.a. Nature of Interest, Transaction, or Income.
A. Held an interest in, engaged in transactions (including loans) with, or omonetary value from an employer whose employees your organization.	derived income or other economic benefit of on represents or is actively seeking to represent.
Enter appropriate data below if, during the past fiscal year, you or your spot (except as specified in the exclu	use or minor child directly or indirectly had any of the following interests sions set forth in the instructions):
Position in labor organization. Exec.Dir. Apprenticeship & Tr	aining
State District of Columbia ZIP Code + 4 20006-5301	State District of Columbia ZIP Code + 4 20006-5301
City Washington	City Washington
Street 1750 New York Ave, NW	Street 1750 New York Avenue, N.W.
P.O. Box, Bldg., Room No., if any Suite 400	P.O. Box, Building and Room Number, if any
Визанным и почение (1919) в 1223 г. на на на нево в 1223 г. на на нево в 1223 г. на	Labor Organization File Number 0000-052
Name Michael L White	Name IRON WORKERS AFL-CIO
Name and address of person filing.	4. Name, file number, and address of labor organization.

Name of Person Filing Michael White		File Number U- 306 9			
B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.					
8. Name and address of Business (including trade name, if any). Name IMPACT Trade Name, if any: P.O. Box, Bidg., Room No., if any Street 1750 New York Ave., NW City Washington State District of Columbia ZIP Code + 4 20006	9. Business deals with: a. Labor Organiza b. Trust c. Employer				
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such deal	ing.	and the states of the states o		
Name Trade Name, if any: P.O. Box, Bldg., Room No., if any	collective bargini \$4,519,541	ions from Employers ing contracts with lo- ce space & employees 84	cal unions.		
Street	11.b. Approximate dollar vali	ue of such dealing	\$5,576,825		
y 1 reason. All 2 houses and 2 reasonable 22 consequents (2 consequents) for gas an abil 2 reasonable 2 consequents 2 consequent	12.a. Nature of interest he		, , , , , , , , , , , , , , , , , , ,		
State ZIP Code + 4	Take the contract of the second state of the second	ncisco Regional Advis	ory Board		
	12.b. Amount.	· · · · · · · · · · · · · · · · · · ·	\$139		
C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.					
13.a. Name and address of Employer or Labor Relations Consultant	14.a. Nature of payment.	остопровійня ропунциров і устопроводій для портуров II зутовного до XII з усторо полі. 1611 полото д	g 2A acres VV. sa aportivi V samonovi Vistaganov		
(including trade name, if any). Name ************************************	N/A		(Certain de Contraction de Contracti		
Trade Name, if any: XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX			denvy, do y may del hidy ;		
P.O. Box, Bldg., Room No., if any XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX			general digital and core		
State ZIP Code + 4 00000 - 0000	Symposicide of Section and Section Section 1985 and Secti	and the control of th	The second secon		
13.b. Is the Business an Employer or Consultant?	14.b. Amount of payment.	general Add version			

Name	οf	Person	Filina	Michael	White

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Part C Continuation Page

C. Received from any employer (other than an employer covered under parts A payment of money or other thing of value.	and B above) or from any labor relations consultant to an employer any
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment,
Name NA	
Trade Name, if any:	
P.O. Box, Bldg., Room No., if any	
Street	
City	
State ZIP Code + 4	
13.b. Is the Business an Employer or Consultant ?	14.b. Amount of payment.
C. Received from any employer (other than an employer covered under parts A payment of money or other thing of value.	and B above) or from any labor relations consultant to an employer any
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.
Name NA	
Trade Name, if any:	
P.O. Box, Bidg., Room No., if any	
Street	
City	
State ZIP Code + 4	
13.b. Is the Business an Employer or Consultant ?	14.b. Amount of payment.
C. Received from any employer (other than an employer covered under parts A payment of money or other thing of value.	and B above) or from any labor relations consultant to an employer any
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.
Name NA	
Trade Name, if any:	
P.O. Box, Bidg., Room No., if any	
Street	
City	
State	
13.b. Is the Business an Employer or Consultant ?	14.b. Amount of payment.

Name of Person Fi	lina w	(ichael	White
Harrie OFF GLOOM FF	ину р	ucnaei	Mutre

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Part B Continuation Page

8. Name and address of Business (including trade name, if any).	9. Business deals with:
Name NA	a. Labor Organization
Trade Name, if any:	Section 1
P.O. Box, Bldg., Room No., if any	b. Trust
Street	c. Employer
City	
State ZIP Code + 4	
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.
Name Name	
Trade Name, if any:	
P.O. Box, Bldg., Room No., if any	
Street	
City	
State ZIP Code + 4	11.b. Approximate dollar value of such dealing.
	12.a. Nature of interest held or income received.
	12.b. Amount.

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Part B Continuation Page

8. Name and address of Business (including trade name, if any).	9. Business deals with:
Name Michigan Re-Steel Contractors Association Trade Name, if any:	a. Labor Organization
P.O. Box, Bldg., Room No., if any	b. Trust
Street 12121 Hyne Road	c. Employer
City Brighton	
State Michigan ZIP Code + 4 48116	
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.
Name	Association with interest and concern about the Construction Industry
Trade Name, if any:	
P.O. Box, Bidg., Room No., if any	
Street	
City	The business of the state of th
State ZIP Code + 4	11.b. Approximate dollar value of such dealing.
	12.a. Nature of interest held or income received.
	1/24/04 Dinner - 2 people
	Approximately \$130.00
	12.b. Amount. \$13

Name	of	Person	Filina	Michael	White
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Part B Continuation Page

9. Business deals with:	
a. Labor Organization b. Trust c. Employer	
11.a. Nature of such dealing.	
Association with interest and concern about the Construction Industry	On the control of the
<u> </u>	
1/28/04 Boat Trip, 2 people Approximately \$70.00	Parameter Commence of Commence
12.b. Amount.	\$70
	a. Labor Organization b. Trust c. Employer 11.a. Nature of such dealing. Association with interest and concern about the Construction Industry 11.b. Approximate dollar value of such dealing. 12.a. Nature of interest held or income received. 1/28/04 Boat Trip, 2 people Approximately \$70.00

Name of Person Filing Michael White	Name of Person	Filina	Michael	White
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Part B Continuation Page

		
8. Name and address of Business (including trade name, if any).	9. Business deals with:	
Name Nat'l Assoc Reinforcing Steel Contractors	a. Labor Organization	
Trade Name, if any: NARSC	b. Trust	
P.O. Box, Bldg., Room No., if any P.O. Box 280	Land Comment	
Street 10382 Main Street	c. Employer	
City Fairfax		
State Virginia ZIP Code + 4 22030		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	and the second of the second o
Name	Association with interest and cond Construction Industry	ern about the
Trade Name, if any:		
P.O. Box, Bidg., Room No., if any		
Street		
City		S (Company)
Chalce To The second of the second state of th	A commence of the comment of the com	
State ZIP Code + 4 kassing presentation of the control of the co	11.b. Approximate dollar value of such dealing.	
	12.a. Nature of interest held or income received. 1/29/04 Cocktail party, 2 people	residence " " (" (" (" (" (" (" (" (" (" (" (" ("
	Approximately \$50.00	
	12.b, Amount.	\$50

Name of f	Person Filing	Michael	White
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Part B Continuation Page

			
8. Name and address of Business (including trade name, if any).	9. Business deals with:		
Name Natl Cncl of Brectors, Fabricators & Riggers	a. Labor Organization		
P.O. Box, Bidg., Room No., if any P.O. Box 280	b. Trust		
Street 10382 Main Street	c. Employer		
City Fairfax			
State Virginia ZIP Code + 4 22030			
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.		
Name Trade Name, if any:	Association with interest and concern about the Construction Industry		
P.O. Box, Bidg., Room No., if any Street			
City			
State ZIP Code + 4	11.b. Approximate dollar value of such dealing.		
	12.a. Nature of interest held or income received.		
	5/10/04 Reception - 2 people		
	Approximately \$180		
	Basic point Marie point Language and Languag		
l .	- La - Thurston - Thurston		

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Part B Continuation Page

	9. Business deals with:			
8. Name and address of Business (including trade name, if any).	O. Digition deals with			
Name National Erectors Association/Segalo	a Labor Composition			
Trade Name, if any:	a. Labor Organization			
P.O. Box, Bldg., Room No., if any	b. Trust			
Street 1501 Lee Highway, Suite 202	c. Employer			
City Arlington				
State Virginia ZIP Code + 4 22209-1104				
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.			
Name	Association with interest and conc Construction Industry.	ern about the		
Trade Name, if any:	Segalco - Firm that performs servi	ces for related		
P.O. Box, Bldg., Room No., if any	pension plans. Monetary dealing willisted below.	tn this firm		
P.O. BOX, DIOG., ROOM NO., 11 arry		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
Street				
City Production of the control of th				
State ZIP Code + 4	11.b. Approximate dollar value of such dealing.	\$58,660		
	12.a. Nature of interest held or income received.			
	5/11/04 - Reception 2 people			
}		FREE TO purpoper medicina Ministra popularis del de sista de propriedendo de sista de 2000 por constante de 1000 por constante de 10		
	12.b. Amount.	\$156		